APPEAL NO. 040777 FILED MAY 28, 2004

This appeal arises pursuant to the Texas Workers' Compensation Act, TEX. LAB. CODE ANN. § 401.001 *et seq.* (1989 Act). A contested case hearing was held on March 11, 2004. The hearing officer determined that the respondent (claimant) sustained a compensable occupational disease injury on _______.

The appellant (self-insured) appeals, contending that the hearing officer failed to make findings on repetitiveness, trauma, and a diagnosis of bilateral carpal tunnel syndrome (BCTS) to support the conclusion of a compensable occupational disease; that the claimant failed to prove causality; and that the claimant's medical evidence does not support the doctor's conclusory statements. The claimant responds, urging affirmance

DECISION

Affirmed.

The claimant, an account examiner, testified in some detail regarding her job duties. The self-insured contends that there is insufficient evidence to establish that the claimant's work, as opposed to a motor vehicle accident (MVA) of April 2, 2003, was the cause of her BCTS. Specifically the self-insured contends that the hearing officer erred in failing to make detailed findings of repetitiveness, trauma, and how the claimant's job duties exposed the claimant to a greater risk than the general public.

The hearing officer made an unappealed finding that the claimant's work activities are repetitive in nature and require a substantial amount of keyboarding. In a disputed finding the hearing officer determined that the claimant's BCTS "is caused in part by the repetitive activities at work." See the concurring opinion in Texas Workers' Compensation Commission Appeal No. 001876, decided September 22, 2000, for a discussion of the requirements for findings of facts and conclusion of law. That opinion cited authority for the proposition that "the objective of findings of fact is to inform the participants of the facts found so that they can intelligently appeal the decision and to assist the reviewing courts in properly exercising their functions of review." We hold that the hearing officer's determinations have met that standard.

The self-insured also contends that the claimant failed to establish a causal link between her BCTS and her employment. We disagree. The record contains medical evidence from two doctors who are of the opinion that the claimant's BCTS was due to a repetitive motion injury rather than a single event such as the MVA. In any event the self-insured's contention only raises a question of fact for the hearing officer to resolve. The hearing officer is the sole judge of the weight and credibility of the evidence. Section 410.165(a). As the trier of fact, the hearing officer resolves the conflicts and inconsistencies in the evidence and decides what facts the evidence has established.

This is equally true of medical evidence. <u>Texas Employers Insurance Association v. Campos</u>, 666 S.W.2d 286 (Tex. App.-Houston [14th Dist.] 1984, no writ). The hearing officer was persuaded that the claimant sustained her burden of proving that she sustained a repetitive trauma injury as a result of performing her job duties with the employer. Nothing in our review of the record reveals that the challenged determination is so against the great weight and preponderance of the evidence as to be clearly wrong or manifestly unjust. Accordingly, no sound basis exists for us to reverse that determination on appeal. <u>Cain v. Bain</u>, 709 S.W.2d 175, 176 (Tex. 1986).

The hearing officer's decision and order are affirmed.

The true corporate name of the insurance carrier is **STATE OFFICE OF RISK MANAGEMENT** (a self-insured governmental entity) and the name and address of its registered agent for service of process is

For service in person the address is:

RON JOSSELET, EXECUTIVE DIRECTOR
STATE OFFICE OF RISK MANAGEMENT
300 W. 15TH STREET
WILLIAM P. CLEMENTS, JR. STATE OFFICE BUILDING, 6TH FLOOR
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	Thomas A. Knapp Appeals Judge
CONCUR:	
Veronica L. Ruberto Appeals Judge	
Margaret L. Turner Appeals Judge	